							Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO							09/417990					
		,		<u></u>				<u> </u>				
2	21912	^~ .	S FILED - Column 1)		mn 2)		SMAL	L ENTITY	OR	OTHER SMALL		
FO	R	NUMB	ER FILED	NUMBER I	EXTRA		RATE	FEE	7	RATE	FEE	
BAS	SIC FEE							380.00	OR		760.00	
TO	TAL CLAIMS	2	minus 2	20= * 8			X\$ 9=	=	OR	X\$18=	144	
IND	EPENDENT CL	AIMS C	minus	3 = *			X39=	;	OR	X78=	468	
MULTIPLE DEPENDENT CLAIM PRESENT							+130=		OR	+260=	140	
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL		OR		1312	
CLAIMS AS AMENDED - PART II								_		OTHER	THAN	
	(Column 1) (Column 2) (Column 3)							L ENTITY	OR	SMALL		
ENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	_	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
MON	Total	. 28	Minus	** 20_	- 8=		∴X\$ 9=		OR	7×\$18=	14402	
AMENDMENT	Independent	* 9	Minus	*** 3	= 6	. ~	X39=	:	OR.	6 X78=	468.0	
	FIRST PRESE	NIATION OF I	MULTIPLE DEI	PENDENT CLAIM		1	+130=	=	OR	+260=		
					٠		TOTA ADDIT. FE		OR	TOTAL ADDIT. FEE	13724	
	(Column 1) (Column 2) (Column 3)									70011.1 22	7	
AENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NDM	Total	*	Minus	**	=		X\$ 9=	=	OR	X\$18=		
AMENDA	Independent	*	Minus	***	=		X39=		OR	X78=		
	FIRST PRESE	NTATION OF I	MULTIPLE DEI	PENDENT CLAIM		ا ا	+130=		OR	+260=		
						l	TOTA	AL		TOTAL		
		(Oak man 4)		(Caluma 0)	(Caluma 0)		ADDIT. FE	EE L	1011	ADDIT. FEE		
	Maria Jagota	(Column 1) CLAIMS		(Column 2) HIGHEST	(Column 3)	lr		ADDI-	1		ADDI-	
AMENDMENT C		REMAINING AFTER AMENDMENT	-8	NUMBER PREVIOUSLY PAID FOR	PRESENT		RATE			RATE	TIONAL FEE	
	Total	*	Minus	**	=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***	=		X39=		OR	X78=	·	
dash	FIRST PRESE	NTATION OF I	MULTIPLE DE	PENDENT CLAIM		\	+130=		1	1360-		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+260=		
**	If the "Highest Nur If the "Highest Nu	mber Previously mber Previously	Paid For" IN THI Paid For" IN THI	S SPACE is less that IS SPACE is less that	in 20, enter "20. in 3, enter "3."	. [TOTA ADDIT. FE	E		ADDIT. FEE		
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

This Form for INTERNAL PTO E ONLY It does NOT get mailed to the applicant.

NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER:

Total Fee Calculation

1 otal Fee Calculation									
•	Fee Code	Total # Claims	Number Extra	<u>x</u>	Fee	Fcc	_	Total	
	Sm./Lg.				Sm. Entity	Lg. Entity			
	- 201/101	•	_				•	760	
Total Claims >20	203/103	28 -20 -	X	х			•	144	
Independent Claims >3	202/102	9 ., -	<u>d</u>	x				4408	
Mult. Dep Claim Present	204/104		•		:			700	
Surcharge	205/105						•	130	
English Translation	139	·						<u></u>	
TOTAL FEE CALCULA	TION							<u>1500</u>	
Fees due upon filing th	ne application:								
Total Filing Fees Due	= \$	1502		_					
Less Filing Fees Submi	itted - \$	Φ			-		•		
BALANCE DUE	= \$	1502		-					
Modes			,						
Office of Initial Patent E	Examination					••			

Figure 7

FORM OIPE-RAM-01 (Rev. 12/97)